

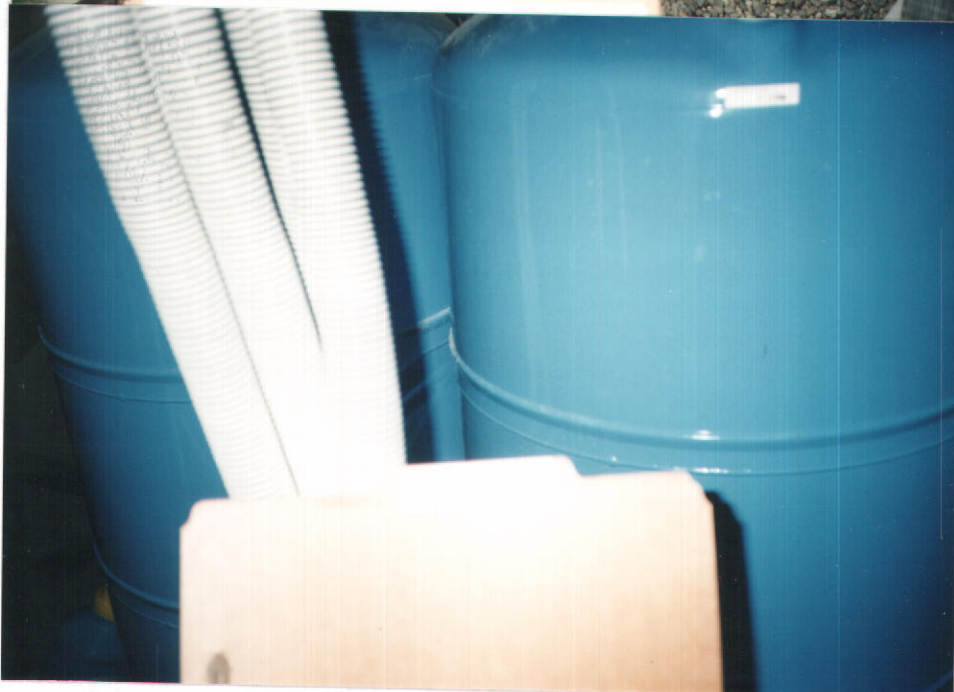
East of the Boise Meridian, Idaho.



PERMIT # 96-08774

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
FIELD REPORT SUPPLEMENT

P H O T O G R A P H S



IMPROVED
JUL 13 1997

PERMIT # 96-08874

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
FIELD REPORT SUPPLEMENT

PHOTOGRAPHS



UNITS
STORE - SNACKS
REAL ESTATE STORE



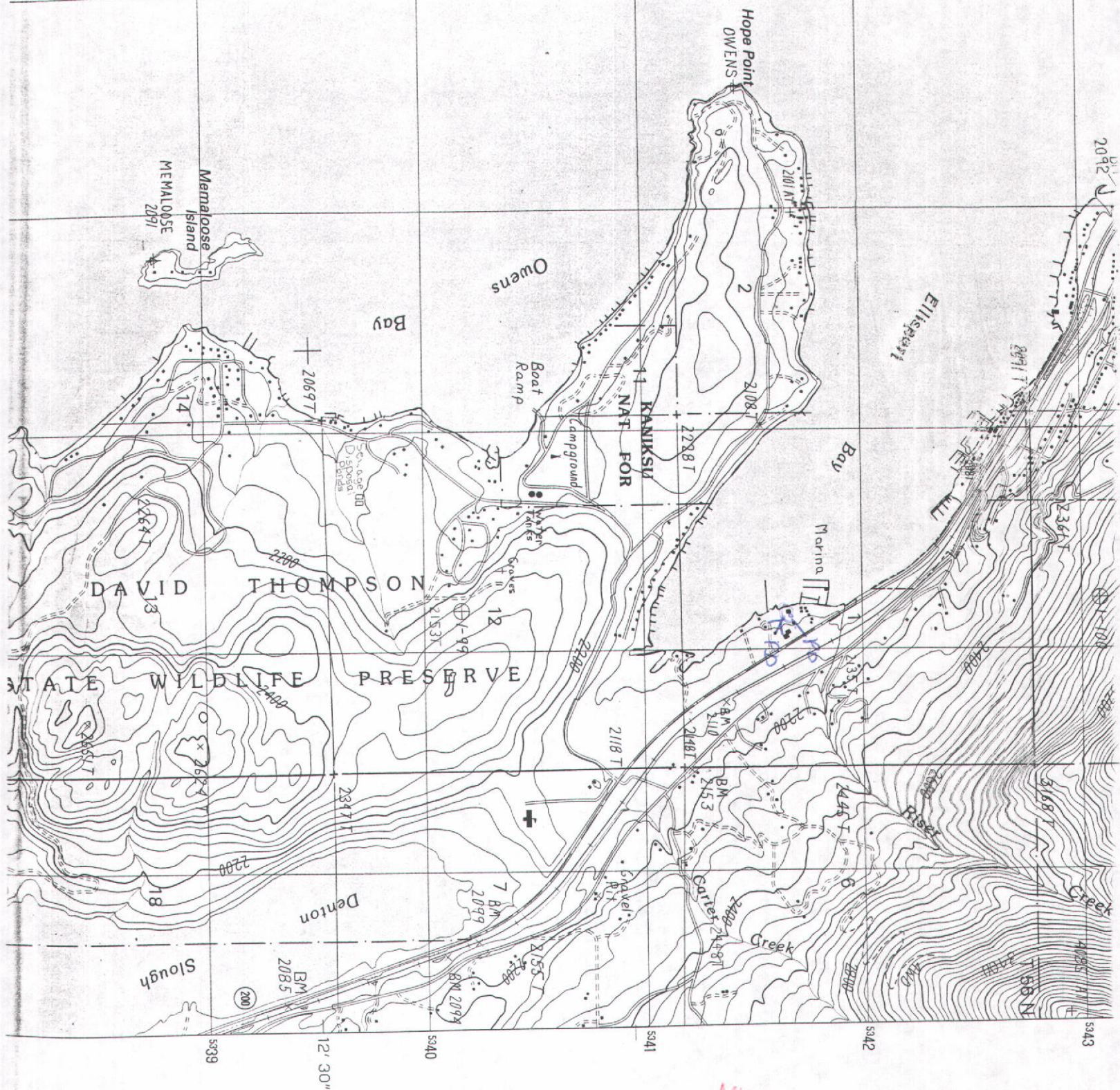
UNITS



UNITS

MICROFILMED
JAN 10 1997

WARREN



MICROFILMED
JAN 10 1997

State of Idaho
Department of Water Resources

WATER RIGHT LICENSE

WATER RIGHT NO. 96-08774

Priority: September 2, 1993

Maximum Diversion Rate:

0.23 CFS

Maximum Diversion Volume:

149.8 AF

This is to certify, that PEND OREILLE SHORES RESORT
1250 STATE HWY 200
HOPE ID 83836-0044

has complied with the terms and conditions of the permit, issued pursuant to Application for Permit dated September 2, 1993; and has submitted Proof of Beneficial Use on November 15, 1994. An examination indicates that the works have a diversion capacity of 0.230 cfs of water from a GROUNDWATER source, and a water right has been established as follows:

<u>BENEFICIAL USE</u>	<u>PERIOD OF USE</u>	<u>RATE OF DIVERSION</u>	<u>ANNUAL VOLUME</u>
IRRIGATION	03/15 to 11/15	0.09 CFS	9.0 AF
COMMERCIAL	01/01 to 12/31	0.23 CFS	110.8 AF
DOMESTIC	01/01 to 12/31	0.23 CFS	30.0 AF
Totals		0.23 CFS	149.8 AF

LOCATION OF POINT(S) OF DIVERSION: Lot 6 (NWSE), Sec. 1, Township 56N, Range 01E
BONNER County

PLACE OF USE: IRRIGATION

<u>TWN</u>	<u>RGE</u>	<u>SEC</u>	<u>ACRES</u>	<u>ACRES</u>	<u>ACRES</u>	<u>TOTAL</u>
56N	01E	1	Lot 6 (NWSE)	3		3

Total number of acres irrigated: 3

PLACE OF USE:

COMMERCIAL, same as IRRIGATION use

PLACE OF USE:

DOMESTIC, same as IRRIGATION use

CONDITIONS OF APPROVAL AND REMARKS

1. The maximum diversion volume is defined as the maximum allowable volume of water that may be diverted annually from the source under this right. The use of water confirmed by this right is limited to the amount which can actually be beneficially used. The maximum diversion volume may be adjusted to more accurately describe the beneficial use or to implement accepted standards of diversion and use efficiency.
2. This water right is appurtenant to the described place of use.
3. This right is subject to all prior water rights and may be forfeited by five years of non-use.
4. Modifications to or variance from this license must be made within the limits of Section 42-222, Idaho Code, or the applicable Idaho law.

State of Idaho
Department of Water Resources**WATER RIGHT LICENSE**

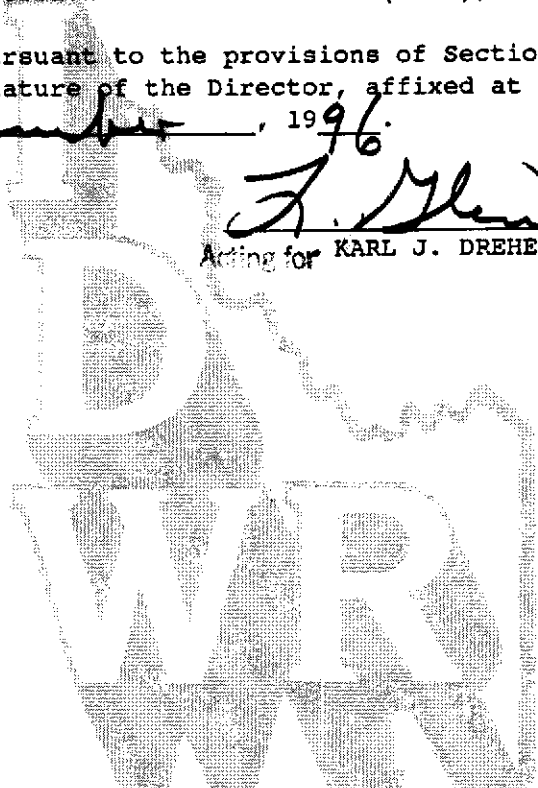
WATER RIGHT NO. 96-08774

CONDITIONS OF APPROVAL AND REMARKS

5. This right when combined with all other rights shall provide no more than .03 cfs per acre nor more than 3.0 afa per acre for the lands above.
6. Domestic use is for 50 unit condominium.
7. Commercial use is for a convenience store, health club, video store, and three administrative buildings.
8. Two points of diversion located in Lot 6 (NWSE), S1, T56N, R1E.

This license is issued pursuant to the provisions of Section 42-219, Idaho Code.
Witness the seal and signature of the Director, affixed at Boise, this 26th
day of November, 1996.


Acting for KARL J. DREHER, Director



RECEIVED

NOV 25 1996

State of Idaho
Department of Water Resources

Department of Water Resources

APPLICATION FOR AMENDMENT

(For Licensing Purposes)

WATER RIGHT NO. 96-08774

Date of Priority: September 2, 1993

Maximum Diversion Rate: 0.23 CFS

Maximum Diversion Volume: 149.8 AF

Comes now

PEND OREILLE SHORES RESORT

1250 STATE HWY 200

HOPE ID 83836-0044

and represents to the Director of the

Idaho Department of Water Resources:

That he is the owner and holder of Permit to appropriate the Public Waters of the State of Idaho No. 96-08774, and requests that the permit be changed as follows:

Source: GROUNDWATER

<u>BENEFICIAL USE</u>	<u>PERIOD OF USE</u>	<u>RATE OF DIVERSION</u>	<u>ANNUAL VOLUME</u>
IRRIGATION	03/15 to 11/15	0.09 CFS	9.0 AF
COMMERCIAL	01/01 to 12/31	0.23 CFS	110.8 AF
DOMESTIC	01/01 to 12/31	0.23 CFS	30.0 AF
	Totals	0.23 CFS	149.8 AF

LOCATION OF POINT(S) OF DIVERSION: Lot 6 (NWSE), Sec. 1, Township 56N, Range 01E
BONNER County

PLACE OF USE: IRRIGATION

<u>TWN</u>	<u>RGE</u>	<u>SEC</u>	<u>ACRES</u>	<u>ACRES</u>	<u>ACRES</u>	<u>TOTAL</u>
56N	01E	1	Lot 6(NWSE)	3		3

Total number of acres irrigated: 3

PLACE OF USE:

COMMERCIAL, same as IRRIGATION use

PLACE OF USE:

DOMESTIC, same as IRRIGATION use

Permit holder asserts that no one will be injured by such change and that such change will be made at permit holder's own risk.

Signed at 1250 Hwy 200 Hope ID, this 18th day of November, 1996.

Lee L. Burr, Manager
(Signature)

State of Idaho
Department of Water Resources

APPLICATION FOR AMENDMENT
(For Licensing Purposes)
WATER RIGHT NO. 96-08774

FOR DEPARTMENT USE ONLY

Preliminary check by Fee = Receipted by # Date

ACTION OF THE DEPARTMENT OF WATER RESOURCES

I, Karl J. Dreher, of the Department of Water Resources hereby approve the
above Application for Amendment for Permit No. 96-08774 with the following;

CONDITIONS OF APPROVAL AND REMARKS

1. The maximum diversion volume is defined as the maximum allowable volume of water that may be diverted annually from the source under this right. The use of water confirmed by this right is limited to the amount which can actually be beneficially used. The maximum diversion volume may be adjusted to more accurately describe the beneficial use or to implement accepted standards of diversion and use efficiency.
2. This water right is appurtenant to the described place of use.
3. This right is subject to all prior water rights and may be forfeited by five years of non-use.
4. Modifications to or variance from this license must be made within the limits of Section 42-222, Idaho Code, or the applicable Idaho law.
5. This right when combined with all other rights shall provide no more than .03 cfs per acre nor more than 3.0 afa per acre for the lands above.
6. Domestic use is for 50 unit condominium.
7. Commercial use is for a convenience store, health club, video store, and three administrative buildings.
8. Two points of diversion located in Lot 6 (NWSE), S1, T56N, R1E.

Witness my hand this 26th day of November, 1996

[Signature]
for **KARL J. DREHER, Director**

NOTED-11/26
11/18/96

RECEIVED

OCT 11 1994

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

Department of Water Resources

PROOF OF BENEFICIAL USE

The Idaho Department of Water Resources considers this form a statement that the permit holder(s) has/have completed all development that will occur under this permit and that water has been applied according to the provisions of the permit for the beneficial use(s) described below. This form must be accompanied by a license examination fee, when necessary, or be accompanied by a completed field examination report prepared by a certified water right examiner who has been appointed by the department.

1. Permit No. 96-08774 Telephone No. 208-264-5828 Ext 421
2. Name(s) of Permit Holder(s): Pand Orelle Shores Resort
3. Mailing Address: 1250 STATE Hiway 200 Hope, Id 83836
4. Source of Water: WELL If GROUNDWATER (well), Date Drilled: mo. 8 / yr. 93
 - a. Well Driller: Hester Drilling Drilling Permit Number: 96-93 N186-000
 - b. **OPTIONAL:**
Pump Horsepower: _____ Pressure (psi): _____ Dynamic pumping level (ft): _____
5. Use(s) (as authorized by the water right permit):
Domestic (No. of households): 50 units condo Stockwater (No. and type of stock): _____
Irrigation (No. of acres): 3 acres Other: Commercial & CONSUMERS Storage Club Admin Office 3
6. Total rate of diversion and/or volume for which proof is submitted: .25 cfs OR _____ acre feet
7. Measuring Device Requirement: (refer to the approval conditions on your permit and respond accordingly)
(This question is not optional. Please check either yes or no. Proofs returned not checked accordingly, will be considered incomplete)

Measuring Device: Is a measuring device required?	Yes <u>X</u> or No _____
Has the measuring device been installed?	Yes <u>X</u> or No _____
Flow Measurement Port: Is a flow measurement port required?	Yes _____ or No <u>X</u>
Has the measurement port been installed?	Yes _____ or No <u>X</u>
8. Fee Enclosed: \$ _____ (See Fee Schedule on back of the instructions for filing proof of beneficial use)
9. Person to contact to accompany the Department representative during field examination of the water system.
Name: Hugh Demers Maintenance Supervisor Telephone Number: 208-264-5828 Ext 421
Address: 1250 STATE Hiway 200 Hope Id 83836
10. The information given on this form is my true statement of the extent to which the above numbered permit has been developed and I relinquish any undeveloped portion of the permit to the State of Idaho.

Signature of permit holder: Hugh Demers Maint Supervisor
(include your title, if on behalf of company or organization)

Date: 10/16/94

DEC 22 1994

State of Idaho
Department of Water Resources
Permit To Appropriate Water

NO. 96-08774

Proposed Priority: September 2, 1993 Maximum Diversion Rate: 0.25 CFS

This is to certify, that **PEND OREILLE SHORES RESORT**

PO BOX 44

HOPE ID 83836-0044

has applied for a permit to appropriate water from: **GROUNDWATER**

and a permit is **APPROVED** for development of water as follows:

<u>BENEFICIAL USE</u>	<u>PERIOD OF USE</u>	<u>RATE OF DIVERSION</u>
IRRIGATION	01/01 to 12/31	0.09 CFS
COMMERCIAL	01/01 to 12/31	0.25 CFS
DOMESTIC	01/01 to 12/31	0.25 CFS
	Totals	0.25 CFS

LOCATION OF POINT(S) OF DIVERSION: Lot 6(NWSE), Sec. 1, Township 56N, Range 01E
BONNER County

PLACE OF USE: IRRIGATION

<u>TWN</u>	<u>RGE</u>	<u>SEC</u>	<u>ACRES</u>	<u>ACRES</u>	<u>ACRES</u>	<u>TOTAL</u>
56N	01E	1	Lot 6(NWSE)	3		3

Total number of acres irrigated: 3

PLACE OF USE: COMMERCIAL, same as IRRIGATION use

PLACE OF USE: DOMESTIC, same as IRRIGATION use

CONDITIONS/REMARKS:

1. Proof of construction of works and application of water to beneficial use shall be submitted on or before **December 1, 1994.**
2. Subject to all prior water rights.
3. A flow measurement port or other device as specified by the Department shall be installed by the right holder to provide for the installation of measuring equipment and the determination of the rate of diversion by the Department.
4. The rate of diversion of water for irrigation under this right and all other water rights on the same land shall not exceed 0.03 cubic feet per second for each acre of land.
5. Domestic use is for 50 unit condominium.
6. Commercial use is for a convenience store, health club, and three administrative buildings.

APPROVED

FEB 25 1994

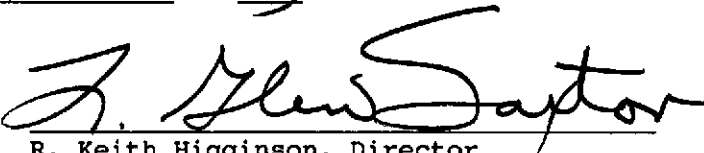
State of Idaho
Department of Water Resources

Permit To Appropriate Water

NO. 96-08774

This permit is issued pursuant to the provisions of Section 42-204, Idaho Code.
Witness the signature of the Director, affixed at Boise, this

6th day of December, 1993.

for 
R. Keith Higginson, Director

RECEIVED

FEB 25 1994

RECEIVED

NOV 09 1993

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
APPLICATION FOR PERMIT

Ident. No. 96-8774

Department of Water Resources To appropriate the public waters of the State of Idaho

1. Name of applicant POND CREVILLE SHORES RESORT Phone (208) 264-5828

Post office address PO Box 44 Hope, ID 83836

2. Source of water supply GROUND WATER which is a tributary of N/A

3. Location of point of diversion is NW $\frac{1}{4}$ of SE $\frac{1}{4}$ of A-1 ^{UNIT} $\frac{1}{4}$, Govt. Lot 6

Sec. 1 Township 54N Range 1E B.M. BONNER County; additional

points of diversion if any: No

4. Water will be used for the following purposes:

Amount 0.09 for IRRIGATION * 3/15 to 11/15 (both dates inclusive)
(cfs or acre-feet per annum) 11/15

Amount 0.25 for COMMERCIAL purposes from 7/1 to 12/31 (both dates inclusive)
(cfs or acre-feet per annum)

Amount 0.25 for DOMESTIC purposes from 7/1 to 12/31 (both dates inclusive)
(cfs or acre-feet per annum)

Amount _____ for _____ purposes from _____ to _____ (both dates inclusive)
(cfs or acre-feet per annum)

5. Total quantity to be appropriated is (a) 0.25 and/or (b) _____
cubic feet per second acre feet per annum

6. Proposed diverting works:

a. Description of ditches, flumes, pumps, headgates, etc. N/A WELL, PUMP & 5,000
GAL. STORAGE TANK.

b. Height of storage dam N/A feet; active reservoir capacity N/A acre-feet; total
reservoir capacity N/A acre-feet; period of year when water will be diverted to storage:
_____ to _____ inclusive.

c. Proposed well diameter is 8" inches; proposed depth of well is 160' Reality 200' feet.

d. Is ground water with a temperature of greater than 85°F being sought? No

e. If well is already drilled, when? 8/18/93; Drilling firm HESTER WELL DRILLING, INC.;

Well was drilled for (well owner) POND CREVILLE SHORES RESORT ASSO.

7. Time required for the completion of the works and application of the water to be proposed beneficial use is

ONE (1) years (minimum 1 year).

FEB 25 1994

* standard irrigation season 11/15/93 cz.

8. Description of proposed uses (if irrigation only, go to item 9):

9. Description of place of use:
- a. If water is for irrigation, indicate acreage in each subdivision in the tabulation below.
- b. If water is used for other purposes, place a symbol of the use (example: *D for Domestic*) in the corresponding place of use below. See instructions for standard symbols.
- c. ~~Municipal~~ show name of municipality. *Pan Creek State Forest*
- d. Domestic: show number of households. *Domestic use is for 50 unit*
- e. Other: describe fully. *Timber share condominium.*
- Commercial use is for convenience store, health care and three administration buildings.*

9. Description of place of use:

Municipal show name of municipality.
 Two Census Tracts Report
 Domestic; show number of households. DOMESTIC USE IS FOR 50 UNIT
 Other; describe fully. TIME SHARE CONDOMINIUM.
 COMMERCIAL USE IS FOR CONVENIENCE STORE, HEALTH CLUB
 AND THREE ADMINISTRATION BUILDINGS.

b. Stockwatering; list number and kind of livestock.

a. Hydropower, show total feet of head and proposed capacity in kW.

[illegible]

Total number of acres to be irrigated.

10. Describe any other water rights used for the same purposes as described above. CURRENTLY USING LAKE WATER
11. a. Who owns the property at the point of diversion? POND CREUISE STRIPES RESORT ASSO
b. Who owns the land to be irrigated or place of use? POND CREUISE STRIPES RESORT ASSO
c. If the property is owned by a person other than the applicant, describe the arrangement enabling the applicant to make this filing. _____

applicant to make this filing.

12. Remarks:

13. Map of proposed project: show clearly the proposed point of diversion, place of use, section number, township and range number.

T56N
SE 1/4
NW 1/4
SEC 1, R1E

Scale: 2 inches equal 1 mile.

BE IT KNOWN that the undersigned hereby makes application for permit to appropriate the public waters of the State of Idaho as herein set forth.

[Signature]
*
(Applicant)

FEB 25 1994

RECEIVED
FEB 25 1994

This is to certify that I have examined Application for Permit to appropriate the public waters of the State of Idaho No. _____, and said application is hereby _____

1. Approval of said application is subject to the following limitations and conditions:

a. SUBJECT TO ALL PRIOR WATER RIGHTS.

b. Proof of construction of works and application of water to beneficial use shall be submitted on or before _____, 19____.

c. The rate of diversion, if water is to be used for irrigation under this permit, when combined with all other water rights for the same land shall not exceed 0.02 cubic feet per second for each acre of land.

d. The water right acquired under this permit if for hydropower purposes shall be junior and subordinate to all rights to the use of water, other than hydropower, within the State of Idaho that are initiated later in time than the priority of this permit and shall not give rise to any right or claim against any future rights to the use of water, other than hydropower, within the State of Idaho initiated later in time than the priority of this permit.

e. Other: _____

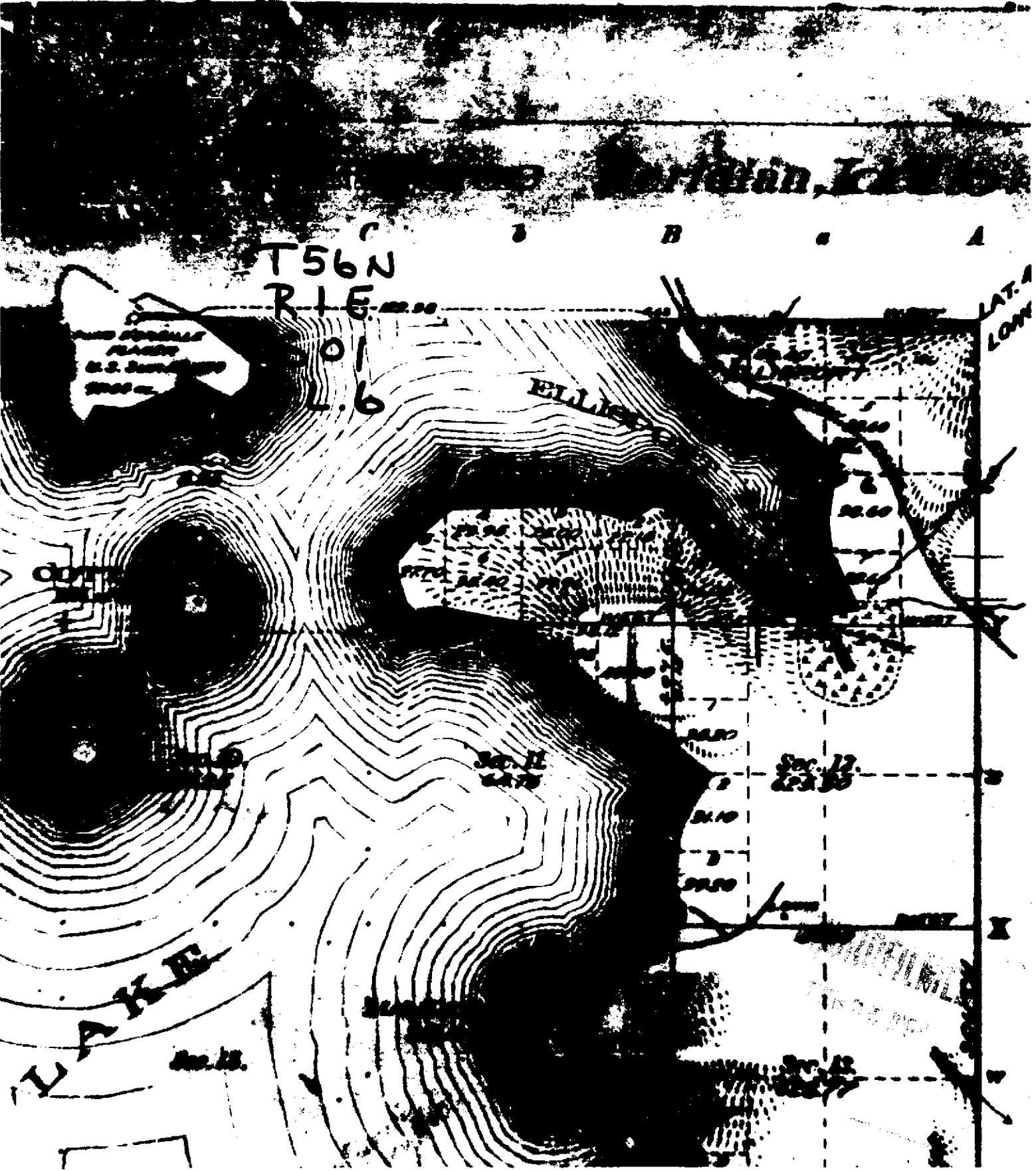
ACTION OF THE DIRECTOR, DEPARTMENT OF WATER RESOURCES

Received by WDF Date 9-2-93 Time 12:54 PM Preliminary check by _____

Fee \$ 45.00 Received by _____ # N 6826 Date 9/2/93

Publication prepared by _____ Date 9/29/93 Published in _____ Date 10/7/93

Publication approved by _____ Date 11/5/93



T56N

R1E

01

L.6

LAT. 4
LONG.

ELLIPSE

LAKE

LAKE

Sec. 12

Sec. 12

Sec. 12

IDAH0 DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

Use Typewriter
or
Ball Point Pen

1. DRILLING PERMIT NO. 96-95-N-6
Other IDWR No. 96-08 774

2. OWNER:

Name PEND OREILLE SHORES RESORT
Address 1250 HWY 200
City HOPE State ID Zip 83836

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.



Twp. 56 North ☒ or South ☐
 Rge. 01 East ☒ or West ☐
 Sec. 01 NW 1/4 SE 1/4 1/4
 Gov't Lot 6 County BONNER

Address of Well Site _____

(Give at least name of road + Distance to Road or Landmark)

Lt. _____ Blk. _____ Sub. Name _____

4. PROPOSED USE:

☐ Domestic ☐ Municipal ☐ Monitor ☐ Irrigation
☐ Thermal ☐ Injection ☒ Other **COMMERCIAL**

5. TYPE OF WORK

☒ New Well ☐ Modify or Repair ☐ Replacement ☐ Abandonment

6. DRILL METHOD

☐ Mud Rotary ☒ Air Rotary ☐ Cable ☐ Other

7. SEALING PROCEDURES

SEAL/FILTER PACK			AMOUNT	METHOD
Material	From	To	Sacks or Pounds	
BENTONITE	0	20	18SACKS	TEMP. SURFACE CASING

Was drive shoe used? ☒ Y ☐ N

Was drive shoe seal tested? Y ☒ N ☐ How? AIR

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
8"	+2	177	.250	STEEL	☒	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

☒ Perforations Method KNIFE

☐ Screens Screen Type _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
165	175	1/4X2	250			☒	☐
						☐	☐
						☐	☐

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

1.52 ft. below ground Artesian pressure _____ lb.
Depth flow encountered _____ ft. Describe access port or
control devices:

NWSE 1 56N 1E

11. WELL TESTS:

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal/min.	Drawdown	Pumping Level	Time
75+			

Water Temp. _____ Bottom hole temp. _____

Water Quality test or comments: _____

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

[illegible]

Completed Depth 179' (Measurable)
Date: Started 1-24-95 Completed 1-25-95

13. DRILLER'S CERTIFICATION

I/We certify that all minimum well construction standards were complied with at the time the rig was removed.

Firm Name PONDEROSA DRILLING & Firm No. 228

DEVELOPMENT INC.
Firm Official *[Signature]* Date 1-30-95

and W. SCOTT BARRATT

Supervisor or Operator L. J. Smith Date 1-30-95

BRAD FORMAN (Sign once if Firm Official & Operator)



State of Idaho

DEPARTMENT OF WATER RESOURCES

1301 North Orchard Street, Statehouse Mail, Boise, Idaho 83720-9000

Phone: (208) 327-7900 FAX: (208) 327-7866

PHILIP E. BATT
GOVERNOR

KARL J. DREHER
DIRECTOR

November 26, 1996

PEND OREILLE SHORES RESORT
1250 STATE HWY 200
HOPE ID 838360044

RE: WATER RIGHT NO. 96-08774

Dear Water Right Holder(s):

Enclosed is a copy of the Water Right License issued on the above referenced permit along with a copy of your approved Application for Amendment. Should you have any questions regarding these documents, please contact me.

Sincerely,

A handwritten signature in cursive script that reads "Shelley W. Keen".

Shelley W. Keen
Water Rights Supervisor

SK:ph

Enclosure

11/29/96
10:14 AM



State of Idaho

DEPARTMENT OF WATER RESOURCES

1301 North Orchard Street, Statehouse Mail, Boise, Idaho 83720-9000

Phone: (208) 327-7900 FAX: (208) 327-7866

PHILIP E. BATT
GOVERNOR

KARL J. DREHER
DIRECTOR

November 13, 1996

PEND OREILLE SHORES RESORT
1250 STATE HWY 200
HOPE ID 83836-0044

RE: WATER RIGHT NO. 96-08774

Dear Water Right Holder(s):

The above referenced water right is in the process of being licensed. However, before a license can be issued, your permit must be amended to depict your water right as it has actually been developed.

The enclosed Application for Amendment contains information that will be included on the license when it is issued. The amendment reflects the addition of a second point of diversion. Please review carefully and if you concur, sign the amendment and return with the \$50.00 filing fee within fourteen (14) days.

The last page of the Application for Amendment form contains a list of Conditions of Approval and Remarks proposed for the license when it is issued. These conditions of approval and remarks may be modified upon further administrative review.

If you do not concur, or if you have any questions about this information, please contact me as soon as possible. My telephone number is (208) 327-7946.

Sincerely,

A handwritten signature in cursive script that reads 'Shelley W. Keen'.

Shelley W. Keen
Water Rights Supervisor

SWK:ph

Enclosure

1000-0141

NOV 19 1996

MEMORANDUM

TO: File 96-08774

FROM: Sharla

DATE: November 8, 1996

RE: Recommendation Adjustment(s)

The final license recommendations for Right 96-08774 are based on the following:

H. RECOMMENDATIONS

1. Recommended Amounts

Irrigation	3/15 - 11/15	0.09 cfs	9.0 afa
Commercial	1/1 - 12/31	0.23 cfs	110.8 afa
Domestic	1/1 - 12/31	0.23 cfs	30.0 afa
	TOTALS	0.23 cfs	149.8 afa

The 50 homes are condominium complexes which have no lawns/gardens attached to the units. The common landscape irrigation is covered by the separate irrigation component. The volume, therefore, for domestic has been changed to reflect in-house use only.

Examiner: Ted McCracken
Exam Date: August 16, 1995

DATE: 11/08/96

BY: Sharla

LICENSE REVIEW CHECKLIST

PERMIT NO. 96-08774

DATE 11/7/96

REVIEWER: S H A R L A

NAME Change OK

Address Change No

SOURCE Change OK

Is change clarification of originally intended source? Yes

If not, prepare Notice of Intent to Void

POINT OF DIV add 2nd well

Amendment required No

PLACE OF USE Change OK

Amendment required No

Does map agree with written description? Yes no

OVERLAPS P/D P/U

RATE OF DIV

Permitted Rate .25 cfs

Fee limit 1.0 cfs \$100⁰⁰

Measured cfs

Theoretical .23 cfs

Recommended Total Div Rate .23 cfs

ANNUAL VOLUME/ NATURE OF USES

Use
Dom.
Comm.
Dom.

Volume Calculation
3X3.0 = 9.0 af
110.8 af
50X.6 = 30.0 af
 af
SUBTOTAL 149.8 af

Flow rate .23 cfs X 365 days X 1.98 af = 166.2 af

Total volume recommended 149.8 af

(SUBTOTAL or Flow Rate, whichever is less)

REMARKS

1/50 homes-irrig not incl

CONDITIONS Watermaster Control WD#

 GW Measurement/Measuring Device

R39 Overlap

 Use-specific conditions

Advancement of Priority Date Required yes no

SRBA Claim Filed N/A

Adjustment Memo volume (dom.)

1st Amend Letter

2nd Amend Letter

P39, P38
P42

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT

RECEIVED

AUG 15 1996

Department of Water Resources

A. GENERAL INFORMATION

Permit No. 96-08774

1. Owner: Penel Oreille Shores Resort Phone No. 208-264-5828 EXT 421

Current Address: 1250 State Hwy 200 Hope Id, 83836

2. Accompanied by: Hugh Demers EXAM DATE: 8-16-95

Address: same as above Phone No. _____

Relationship to Permit Holder: employee

3. Source: groundwater tributary to sinks

B. OVERLAP REVIEW

1. Other water rights with the same place of use: _____

2. Other water rights with the same point of diversion: _____

C. DIVERSION AND DELIVERY SYSTEM

1. Point(s) of Diversion:

Ident No.	Gov't Lot	1/4	1/4	1/4	Sec.	Twp.	Rge.	County	Method of Determination/Remarks
	06		NW	SE	01	56N	01E	BONNER	USGS 7.5 MIN QUAD

2. Place(s) of Use:

Indicate Method of Determination

TWP	RGE	SEC	NE				NW				SW				SE				Totals
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
56N	01E	01																	3

RECORDED
INDEXED

3. Delivery System Diagram: Indicate all major components and distances between components. Indicate weir size/ditch size/pipe l.d. as applicable.

Scale: 1" = _____

_____ Copy of USGS Quadrangle Attached Showing location(s) of point(s) of diversion and place(s) of use (required).

_____ Aerial Photo Attached (required for irrigation of 10+ acres)

_____ Photo of Diversion and System Attached

4.

Well or Diversion Identification No.*	Motor Make	Hp	Motor Serial No.	Pump Make	Pump Serial No. or Discharge Size
	Submersible	5	N/A	Submersible	

*Code to correspond with No. on map and aerial photo

D. FLOW MEASUREMENTS

1.

Measurement Equipment	Type	Make	Model No.	Serial No.	Size	Calib. Date

2. Measurements:

E. NARRATIVE/REMARKS/COMMENTS

Water for domestic and Commercial supplied
By 2 Wells. did a theoretical check on
Both wells for flow. Commercial is for
on site mini store, Nides store, gym
and administration Buildings (3) The resort has
50 rentals.

Have conditions of permit approval been met? ☒ yes ☐ no

RECEIVED
JAN 10 1997

F. FLOW CALCULATIONS

Measured Method:

Additional Computation Sheets Attached

G. VOLUME CALCULATIONS

1. Volume Calculations for Irrigation:

$$V_{IR} = (\text{Acres Irrigated}) \times (\text{Irrigation Requirement}) = 3.0 \times 3.0 = 6$$

$$V_{DR} = [\text{Diversion Rate (cfs)}] \times (\text{Days in Irrigation Season}) \times 1.9835 = .094295 \times 19835 = 437$$

$$V = \text{Smaller of } V_{IR} \text{ and } V_{DR} = 6$$

2. Volume Calculations for Other Uses:

$$\text{COMMERCIAL (16 hrs day)} = .23 \times 243 \times 1.9835 = 110.8$$

$$\text{DOMESTIC} = 1.2 \times 50 = 60$$

H. RECOMMENDATIONS

1. Recommended Amounts

Beneficial Use	From	To	Rate of Diversion	Annual Volume
IRRIGATION	03-15	11-15	0.09	6
COMMERCIAL	01-01	12-31	0.23	110.8
DOMESTIC	01-01	12-31	0.23	60
Totals:			0.23	176.8

2. Recommended Amendments

Change P.D. as reflected above ☐ Add P.D. as reflected above ☒ None ☐

Change P.U. as reflected above ☐ Add P.U. as reflected above ☐ Other ☐

I. AUTHENTICATION

Field Examiner's Name Ed McCracken Date 11/1/95

Reviewer _____ Date _____

SEAL

THEORETICAL PUMP EFFICIENCY CALCULATIONS

FILE: 96-08774

DATE: 1-NOV-95

COMPLETE BY: TED MCCRACKEN

HORSEPOWER = 5

PUMP EFFICIENCY = 75%

DYNAMIC LIFT = 90 FEET

SYSTEM PRESSURE = 75 PSI

QUANTITY = 0.12 CFS

*McCormick
And Co. Inc.*

THEORETICAL PUMP EFFICIENCY CALCULATIONS

FILE: 96-08774

DATE: 22-SEP-95

COMPLETE BY: TED MCCRACKEN

HORSEPOWER = 5

PUMP EFFICIENCY = 75%

DYNAMIC LIFT = 177 FEET

SYSTEM PRESSURE = 50 PSI

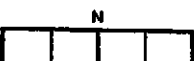
QUANTITY = 0.11 CFS

100-100000
100-100000

**Use Typewriter
or
Ball Point Pen**

2. OWNER:
Name Dend O Reille Shores Resort
Address 1250 Hwy 700
City Hope ~~Id~~ State 2D Zip 83836

Sketch map location must agree with written location.



Twp. 56 North ☒ or South ☐
 Rge. 1 East ☒ or West ☐
 Sec. 1 1/4 SE 1/4 NW 1/4
 Gov't Lot _____ County BONNER

Address of Well Site

City

Lt. _____ Blk. _____ Sub. Name Unit A-1

☐ Domestic ☐ Municipal ☐ Monitor ☐ Irrigation
☐ Thermal ☐ Injection ☐ Other _____

☐ New Well ☐ Modify or Repair ☐ Replacement ☐ Abandonment

☐ Mud Rotary ☐ Air Rotary ☐ Cable ☐ Other

SEAL/FILTER PACK			AMOUNT	METHOD
Material	From	To	Sacks or Pounds	

Was drive shoe used? ☐ Y ☐ N ☐

Was drive shoe seal tested? Y ☒ N ☐ How?

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐

Length of Headpipe _____ Length of Tailpipe _____

☐ Perforations Method _____

☐ Screens Screen Type _____

From:	To	Slot Size	Number	Diameter	Material	Casing	Lines
						☐	☐
						☐	☐
						☐	☐

20 ft. below ground Artesian pressure _____ lb.

Depth flow encountered _____ ft. Describe access port or control devices: _____

56NW | 56N | E

☐ Pump ☐ Bailer ☐ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time

Water Temp. _____ Bottom hole temp. _____

Water Quality test or comments:

Water

[illegible]

Completed Depth _____ (Measurable)

Date: Started 6-1-94 Completed 6-1-94

I/We certify that all minimum well construction standards were complied with at the time the rig was removed.

Firm Name Hester well Drilling Firm No. 528

Firm Official [Signature] Date 7-26-94

and

Supervisor or Operator C. Mark Hardin Date 7-25-94

(Sign once if Firm Official & Operator)



IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

**Use Typewriter
or
Ball Point Pen**

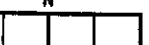
1. DRILLING PERMIT NO. 96 - 95 - N - 6
Other IDWR No. 96-08 774

2. OWNER:

Name PEND OREILLE SHORES RESORT
Address 1250 HWY 200
City HOPE State ID Zip 83836

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.



Twp. 56 North ☒ or South ☐
 Rge. 01 East ☒ or West ☐
 Sec. 01 NW 1/4 SE 1/4 1/4
 Gov't Lot 6 County BONNER

Address of Well Site _____

(Give at least name of road + Distance to Road or Landmark)

Lt. _____ Blk. _____ Sub. Name _____

4. PROPOSED USE:

☐ Domestic ☐ Municipal ☐ Monitor ☐ Irrigation
☐ Thermal ☐ Injection ☒ Other COMMERCIAL

5. TYPE OF WORK

☒ New Well ☐ Modify or Repair ☐ Replacement ☐ Abandonment

6. DRILL METHOD

☐ Mud Rotary ☒ Air Rotary ☐ Cable ☐ Other

7. SEALING PROCEDURES

SEAL/FILTER PACK			AMOUNT	METHOD
Material	From	To	Sacks or Pounds	
BENTONITE	0	20	18SACKS	TEMP. SURFACE
				CASING

Was drive shoe used? ☒ YES ☐ NO

Was drive shoe seal tested? Y ☒ N ☐ How? AIR

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
8"	+2	177	.250	STEEL	☒	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

✕ Perforations Method KNIFE

☐ Screens	Screen Type
----------------------------------	-------------

From	To	Slot Size	Number	Diameter	Material	Casing	Lines
165	175	1/2X2	250			☒	☐
						☐	☐
						☐	☐

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

1.52 ft. below ground Artesian pressure lb.

Depth flow encountered _____ ft. Describe access port or control devices: _____

NWSE 1 SGN IE
Gout lot 6 FORWARD UNIT

11. WELL TESTS:

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
75+			

Water Temp. _____ Bottom hole temp. _____

Water Quality test or comments:

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

[illegible]

13. DRILLER'S CERTIFICATION

I/We certify that all minimum well construction standards were complied with at the time the rig was removed.

Firm Name PONDEROSA DRILLING & Firm No. 228

DEVELOPMENT, INC.

Firm Official W. Scott Barratt Date 1-30-95
and W. SCOTT BARRATT

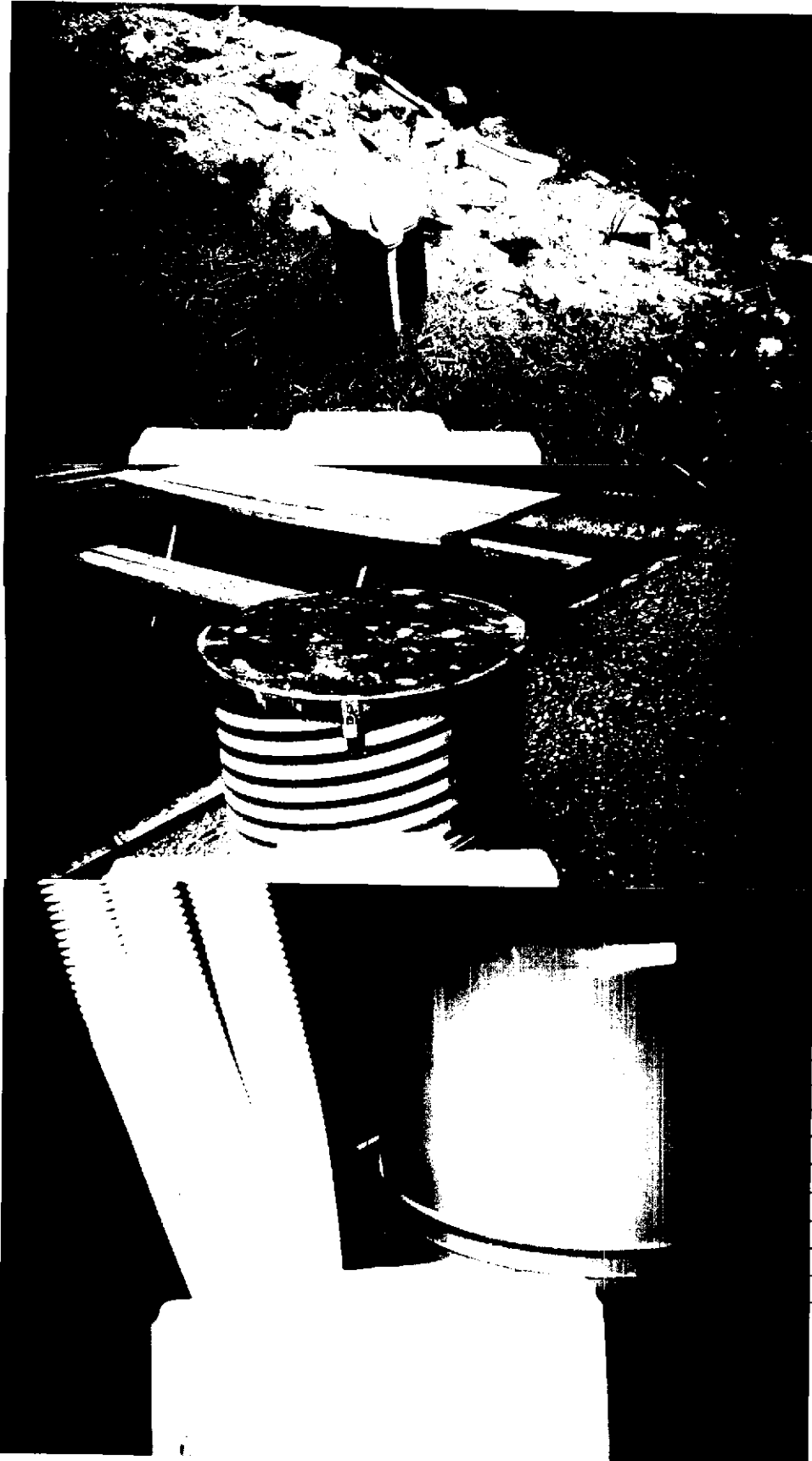
Supervisor or Operator L. S. [Signature] Date 1-30-95

Supervisor or Operator BRAD FORMAN
 BRAD FORMAN (Sign once if Firm Official & Operator)

PERMIT # 96-08774

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
FIELD REPORT SUPPLEMENT

P H O T O G R A P H S



A series of horizontal lines for handwritten notes, corresponding to the photographs on the left.

PERMIT # 96-08874

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
FIELD REPORT SUPPLEMENT

PHOTOGRAPHS



UNITS

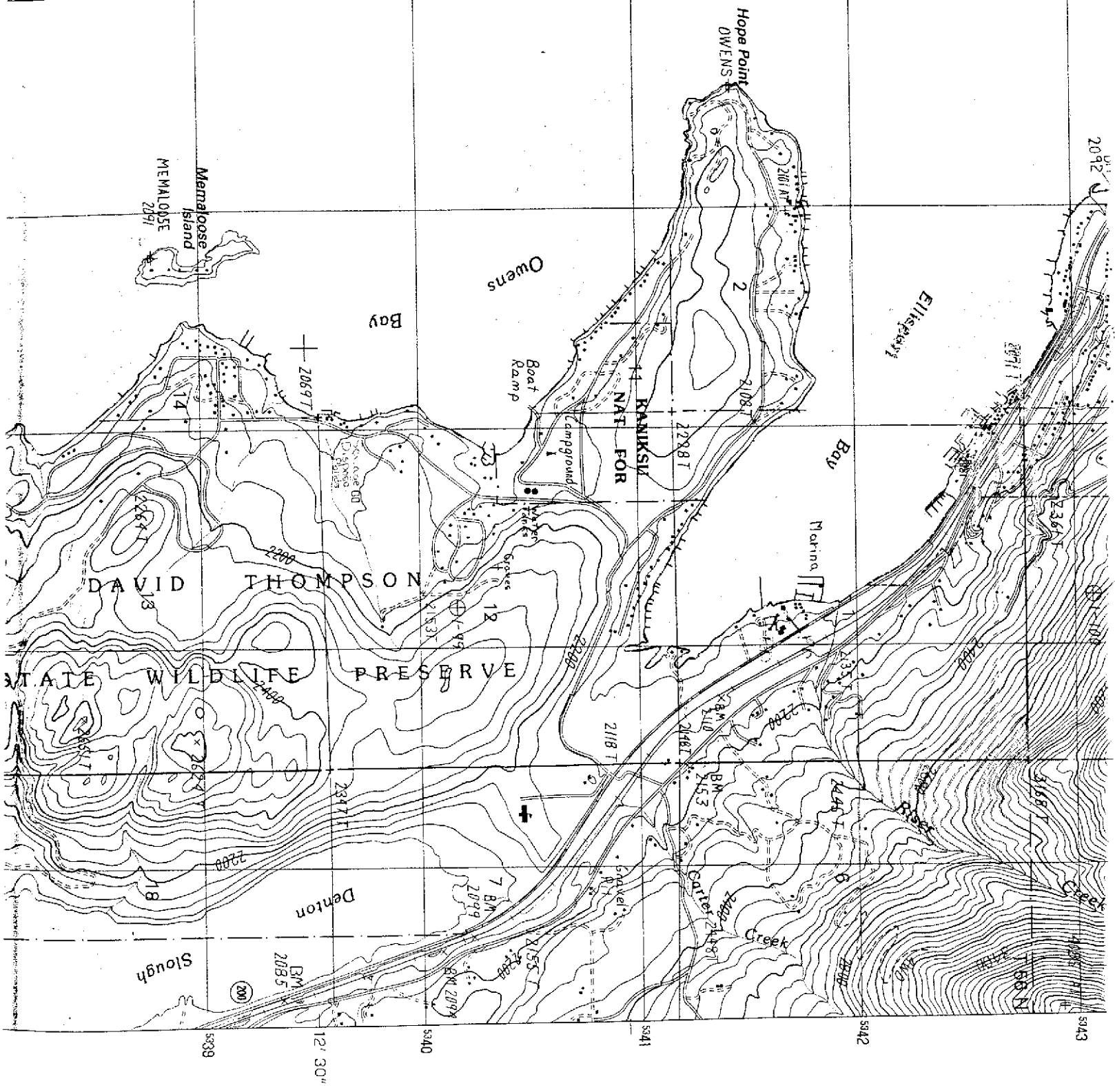
STORE - SNACKS
REAL ESTATE STORE



UNITS



UNITS



**ANALYSIS SHEET
FOR
PROOF OF BENEFICIAL USE**

Permit No. 96-08774 Reviewed by JJ Date 10/13/94

GENERAL CONSIDERATIONS

yes Name same as permit?
no Address same as permit?
yes Proof timely received?
If not, complete calculation below.

TYPES OF USE

Dom Irr Comm.

Correct Uses? yes

SOURCE OF WATER

 Surface water source

✓ Ground water source

yes Drilling permit required?

no Copy in the file? Drilling Permit No. 96-93-N-0186

200.00 Amount paid for permit

yes Well log in the file?

yes Correct?

LICENSE EXAMINATION FEE

yes Required?
0 Amount Submitted
no Correct?

MEASURING DEVICE

yes Required?
yes Installed?
 Waiver requested?

PRIORITY CALCULATION

Date proof received	<u> </u>
Date proof due	<u> </u>
No. of days late	<u> </u>
Priority Date	<u> </u>
New Priority Date	<u> </u>

DEFICIENCIES OR ACTION ITEMS

Return for 100.00 lic Exam fee
11/21- Fee received - Proof acceptable

DATA ENTRY

New Address 1250 State HWY 200
Hope, Id. 83836

Proof Made 10/11/94



State of Idaho

DEPARTMENT OF WATER RESOURCES

1301 North Orchard Street, Statehouse Mail, Boise, Idaho 83720-9000
Phone: (208) 327-7900 FAX: (208) 327-7866

CECIL D. ANDRUS
GOVERNOR

R. KEITH HIGGINSON
DIRECTOR

November 23, 1994

PEND OREILLE SHORES RESORT
1250 STATE HWY 200
HOPE ID 83836

PROOF ACKNOWLEDGEMENT LETTER

RE: PERMIT NO. 96-08774

Dear Permit Holder:

The department acknowledges receipt of the proof of beneficial use form submitted for the above referenced permit.

The next step in the process of developing a water right is for the department to conduct a field examination to determine and confirm the use being made of the water.

If you have questions concerning this matter, please feel free to contact the NORTHERN Regional Office in Coeur d'Alene, at (208) 769-1450.

Sincerely,

A handwritten signature in cursive script that reads "Julie L. Yarbrough".

JULIE L. YARBROUGH
Senior Secretary

c: IDWR - Region

DEC 22 1994



State of Idaho
DEPARTMENT OF WATER RESOURCES

1301 North Orchard Street, Statehouse Mail, Boise, Idaho 83720-9000
Phone: (208) 327-7900 FAX: (208) 327-7866

CECIL D. ANDRUS
GOVERNOR

R. KEITH HIGGINSON
DIRECTOR

October 19, 1994

Pend Oreille Shores Resort
1250 State HWY 200
Hope, ID 83836

RE: Permit No. 96-08774

Dear Permit Holder :

Returned is a copy of the Proof of Beneficial Use form submitted to this office in connection with the above referenced permit. Unfortunately, it can not be accepted as filed.

The proof indicates the total rate of diversion of water to be 0.25 cfs from a ground water source. The license exam fee for a rate of 0.25 cfs is \$100.00.

Please return the copy of the proof along with a license examination fee of \$100.00 within thirty (30) days of receipt of this letter. Please address any correspondence directly to me.

If you have any questions or if I can be of any assistance, please feel free to contact me at (208)327-7953.

Sincerely,

A handwritten signature in cursive script that reads "Julie L. Yarbrough".

JULIE L. YARBROUGH
Senior Secretary

Enclosure

DEC 22 1994

September 30, 1994

PEND OREILLE SHORES RESORT
PO BOX 44
HOPE ID 838360044

PROOF DUE NOTICE

RE: PERMIT NO. 96-08774

Dear Permit Holder:

One of the conditions of approval of the above referenced water permit was that proof of the extent of your beneficial use must be submitted to this office on or before December 1, 1994. (See last page of your approved permit or your last approved extension request.) Enclosed is a form which when accompanied by the license examination fee or a complete field examination report prepared by a certified water right examiner may be used to submit the required proof.

If you have not fully completed your project, and you or a previous owner of this permit have not received a prior extension of time, you may request an extension of time if the delay is for reasonable cause as provided in Section 42-204, Idaho Code. If you have been prevented from proceeding by a governmental agency or by litigation which might bring title to the water in question, more than one extension of time can be granted. An extension of time request form is enclosed for your convenience.

Either an acceptable proof of beneficial use submittal or an acceptable request for an extension of time must be received by this department on or before the above described proof due date. If neither is received, the department will send you a lapse notice. Within sixty (60) days of the mailing of the lapse notice, the permit will no longer be of any force nor effect.

SINCERELY,

JULIE L. YARBROUGH
Senior Secretary

Enclosures

CERTIFIED MAIL

NO. 141688



State of Idaho

DEPARTMENT OF WATER RESOURCES

1301 North Orchard Street, Statehouse Mail, Boise, Idaho 83720-9000

Phone: (208) 327-7900 FAX: (208) 327-7866

CECIL D. ANDRUS
GOVERNOR

R. KEITH HIGGINSON
DIRECTOR

December 6, 1993

PEND OREILLE SHORES RESORT
PO BOX 44
HOPE ID 838360044

PERMIT APPROVAL NOTICE

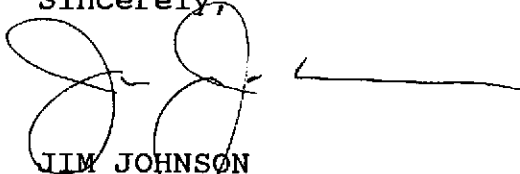
RE: PERMIT NO. 96-08774

Dear Permit Holder:

Enclosed is a copy of your approved application for permit.
Please be sure to thoroughly review the "CONDITIONS/REMARKS:"
listing on the permit.

Be sure to note the special condition requiring you to install a
measuring device. Enclosed, for your reference, is a list of
measuring device options.

Sincerely,



JIM JOHNSON
Water Rights Supervisor

JJ:dc

Enclosures

RECEIVED
FEB 25 1994

APPLICATION FOR PERMIT
STATE OFFICE REVIEW

Application #: 96-8774 Date: 11/29/93 Reviewer: Cindy Zimmerman

AREA OF CONCERN? - No/Yes _____

SYSTEM COMPLETED:

No - 26A-P17

Complete in 1 year - P16

Yes

Proof not submitted - P16

Proof submitted - NA

GROUNDWATER:

+ 0.2 cfs <flo-ch> - 01G-P03 (new), 01C-P03 (existing), NMR

- 0.2 cfs - NMR <flow chart>

Drilling Permit:

Included w/permit - Permit No. 96-93-N-186-000, P99

Existing well - N/A (if drilled before 7/1/87)

No WD permit? - 046-46A<Irr>-46B-P23 (if drilled after 7/1/87)

SURFACE WATER: not in WD - 01C-P03 (+.2 w/pump), NMR <flow chart>

LOCATION:

Water District - WD No. _____

Surface water - 005 (req) 01J-P08 <flow chart>

(doesn't sink) or 01H-P01 <flow chart>; NMR

Groundwater - P05 (if well has not been drilled)

In stream channel - 030 (stream channel alteration)

Irrigation Dist. - 023

Canal Co. Areas - 023

Drainage Districts - 024

Flood Control Dist. - 063

Boise Front (63) - 058 (Groundwater temperature)

Swan Falls Flag - B <See condition code chart>

Trust - 051-052-053-P74 (Consumptive Uses), NA

Non Trust <1> - 048-049 (Consumptive Uses), NA

RIVER BASINS (Surface): Water District Control Condition (005) &....

Boise (63) - 05A (req), 11E (non-domestic use), NA

Payette (65) - 064 (consump. use), 047-P04 (Payette Lake), NA

Snake (01, 02 & 03) - 11A-P04 (01), 061-P07 (02/03 No W.D.Cond.), NA

USE:

Fish Propagation - 010/06A/09E-P10 (WQ) & 07A-042 (req)

444 (N 1000 Spr)

Irrigation - 803 (if GW use SW 1st) (+5A do POU comp.), NA

Power - 08A-17K-025-027 (req); 01F-P19; 09E-P10;

+25 cfs-P18; 17G(FERC) or 17M(FERC); 18B-P09

Mining - 06A/010/09E-P10 & 054 (req)

Storage (✓ 3 compo.) - 18A-for multi MD in WD, 18B-P09 (+10' dam), NA

Domestic (surface) - 021 (Boise R ↑ L Peak), 27A (Payette R), NA

OWNERSHIP:

Non land owner - 004 (P/D or P/U)

PROTESTED:

Prehearing agreement - 020

OTHER CONDITIONS: - 057

REMARKS: - ① wo. (50 condo's) ② Comm use for convenience store, health club,

& 3 admin bldgs.

BENEFICIAL USE DUE: - 12-1-1994

COMMENTS: - ① Div Desc. ② Corp Off

DATE: 11/29/93
PAGE: 1

Stage: PERMIT

Misc: Water District Number: Field Exam Fee:

WR0749NP
No. P96-08774

IDAHO DEPARTMENT OF WATER RESOURCES
WATER RIGHT PROFILE REPORT
(REGIONAL)

DATE: 11/29/93
PAGE: 2

=====

Comments: Date: 09/27/1993 User-ID: STYPA Subject: DIVERSION DESCRIPTION
Well, pump and 5,000 gallon storage tank.

Date: 11/29/1993 User-ID: ZIMMERMA Subject: CORPORATE OFFICERS
The corporate officers of Pend Oreille Shores Resort are:
Jack Vallega, President;
Ray Greening, Vice President;
Jim Cavanaugh, Secretary/Treasurer;
Dave Burgess, Board Member
Curtis Clark, CPA, Board Member.

Audit: 11/29/93 ZIMMERMA

Pend Oreille Shores Resort

RECEIVED
NOV 26 1993

Department of Water Resources

November 22, 1993

Cindy Zimmerman, Water Resource Agent
State of Idaho Department of Water Resources
1301 North Orchard Street, Statehouse Mail
Boise, ID 83720-9000

Dear Ms. Zimmerman:

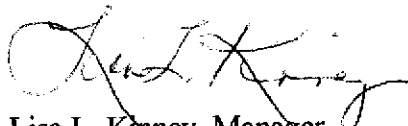
In response to your letter of November 15, 1993, the names, titles, and addresses of all the corporate officers of Pend Oreille Shores Resort are as follows:

Jack Vallega, President
Box 44 Hope, ID 83836
Ray Greening, Vice President
1300 Hwy 200 Hope, ID 83836
Jim Cavanaugh, Secretary/Treasurer
Box 6 Hope, ID 83836
Dave Burgess, Board Member
Box 1921 Bozeman, MT 59771
Curtis Clark, CPA, Board Member
Clark, Anderson, & Co., PA
1621 N. 3rd Suite 1000
Coeur d' Alene, ID 83814

I hope this information will help you further process our application for permit for irrigation, commercial and domestic uses.

Please call me at (208) 264-5817 if you need any further information.

Sincerely,



Lisa L. Kinney, Manager
Pend Oreille Shores Resort

cc: file

RECEIVED

FEB 25 1994

1250 Hwy 200 • Hope, Idaho 83836
Sales (208) 264-5817 • Owner Services (208) 264-5828 • Fax (208) 264-5385



State of Idaho

DEPARTMENT OF WATER RESOURCES

1301 North Orchard Street, Statehouse Mail, Boise, Idaho 83720-9000

Phone: (208) 327-7900 FAX: (208) 327-7866

November 15, 1993

CECIL D. ANDRUS
GOVERNOR

R. KEITH HIGGINSON
DIRECTOR

PEND OREILLE SHORES RESORT
PO BOX 44
HOPE ID 83836-0044

RE: Application for Permit No. 96-08774

Dear Sirs:

I have received your application for permit for irrigation, commercial and domestic uses for final review. However, I need a list of the names, titles, and addresses of all the corporate officers of Pend Oreille Shores Resort.

I will hold further processing on your application for 30 days pending your response. Please submit this information as quickly as possible within the 30-day period to prevent any further undue delay in processing your application.

If you have any question, please feel free to contact me at (208) 327-7944.

Sincerely,

A handwritten signature in cursive script that reads 'Cindy Zimmerman'.

CINDY ZIMMERMAN
Water Resource Agent

c: Northern Region

A faint circular stamp, likely an official seal or processing mark, located in the bottom right area of the page.

FEB 5 5 1994

No. a
4/87-06/92n

IDAHO DEPARTMENT OF WATER RESOURCES
APPROPRIATION APPLICATION ANALYSIS SHEET

RECEIVED
NOV 09 1993

APPLICATION # _____

***** INITIAL REVIEW ***** Department of Water Resources

APPLICANT: PEND OREILLE SHORES BY: AB DATE: 9 / 2 / 93

ITEM REQUIRED INFORMATION

1. (X) Name and Address
2. (X) Source
3. (X) Point of Diversion & County
4. (X) Quantity
(X) Nature of Proposed Use
(X) Period of Use
5. (X) Total Quantity
6. (X) Description of diverting works
7. (X) Time required for b/u
8. (X) Proposed use
9. (X) Place of use or acres irrigated
10. (X) Other Water Rights
11. (X) Ownership
13. (X) Map
(X) Signature
(X) Fee (Amt, recpt, acknowledgment)

*** Send info sheet Y () N ()

ADDITIONAL INFORMATION

Yes No

- X Field check: by _____
_____ Field report attached
_____ Analysis Supp. attached(>5cfs/500af)
_____ Water delivered by water master?
_____ Water District # _____

PROCESSING

Yes No

PRIORITY DATE: 9 / 2 / 93

_____ X (Include Moratorium Remark)

_____ X Statewide Avertising: (Diversion rate greater than 10 cfs or 1,000 af).

ADVERTISE IN: BONNER County.

LETTERS SENT REQUESTING:

- () Dam Information () Fish Information
() Power Information () Other: N/A

INFORMATION RECEIVED:

- () Dam Information () Fish Information
() Power Information () Other: N/A

***** GROUNDWATER SECTION *****

(Yes) (No)

Checked by: _____ Date: ____/____/____

Remarks: _____

- _____ X Groundwater management area
_____ X Critical ground water area
_____ X Well Drilling Permit required
_____ Well Drilling Application and Fees received
_____ Well Drilling Application approved?
_____ Well Drilling Application Number 96-93 - N - 186

***** FINAL REGIONAL PROCESSING/REVIEW *****

(Yes) (No)

- _____ Notice of pending void order issued. Final order response date: ____/____/____
_____ Further information required from applicant
_____ Affidavit of publication received
_____ Application published correctly, If not, record action taken: _____
_____ Publication dates and paper recorded on application | Sr. Agent initial AB
_____ Protests received. Final protest date: 10/25/93
_____ Measuring device required
_____ Measuring port required
_____ Special conditions: _____
_____ Special conditions of approval supplement and/or cover letter attached:

Approval Recommended by: AB PMA Date: 11 / 8 / 93

96-08774

PEND OREILLE SHORES RESORT
PO BOX 44
HOPE, ID 83836

Source: GROUNDWATER

Diversion Pt: LOT 6 (NWSE) Sec 1 T 56N R 01E in BONNER County.

Use: IRRIGATION	(.090 CFS)
COMMERCIAL	(.250 CFS)
DOMESTIC	(.250 CFS)
Total Diversion:	(.250 CFS)

Date Filed: 9/ 2/1993

In: ~~ADA~~ County
T56N R01E S01 NWSE

3.0 3.0 ACRES TOTAL

*changed on
computer
10/5/93*

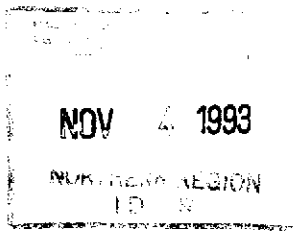
RECORDED

FEB 25 1994

AFFIDAVIT OF PUBLICATION

State of Idaho

ss.



County of Bonner,

B. Jean Conacher being first duly sworn on oath
deposes and says that ~~he~~/she is Bookkeeper
of the Bonner County Daily Bee, a newspaper printed and
published at Sandpoint, Bonner County, Idaho; that the
said newspaper has been continuously and uninterruptedly
published in said Bonner County during a period of 12
months prior to the first publication of the hereto attached
notice of publication in the case of:

Legal Notice: App. for Water
Right

as it was published in the regular and entire issue of the
said paper for a period of 2 consecutive weeks,
commencing on 7 day of Oct., 1993
and ending on the 14 day of Oct., 1993
and that said notice was published in said newspaper.

On this 14 day of Oct. in the year
of 1993, before me, a Notary Public, personally
appeared B. Jean Conacher,
known or identified to me to be the person whose name
subscribed to the within instrument, and being by me first
duly sworn, declared that the statements therein are true,
and acknowledged to me that he executed the same.

Karel Mueller
Notary Public for Idaho

Residing at Sandpoint

My commission expires: 5399

**NOTICE OF APPLICATION
FOR WATER RIGHT**

The following application(s) have
been filed to appropriate the public
waters of the State of Idaho:

96-08772

FINDLEY, WILLIAM

FINDLEY, RUTH

PO BOX 51

PONDERAY, ID 83852

Source: UNNAMED STREAM

Tributary: GROUSE CREEK

Diversion Pt: NWSE Sec 7 T 59N

R 02E in BONNER County.

Use: POWER (.200 CFS)

Total Diversion: (.200 CFS)

Date Filed: 9/14/1993

In: BONNER County

T59N R02E S07 SWSE

96-08774

PEND OREILLE SHORES

RESORT

PO BOX 44

HOPE, ID 83836

Source: GROUNDWATER

Diversion Pt: LOT 6 (NWSE) Sec

1 T 56N R 01E in BONNER County.

Use: IRRIGATION (.090 CFS)

COMMERCIAL (.250 CFS)

DOMESTIC (.250 CFS)

Total Diversion: (.250 CFS)

Date Filed: 9/2/1993

In: BONNER County

T56N R01E S01 NWSE

3.0 ACRES TOTAL

For additional information con-
cerning the property location, call
the Northern Regional Office at

(208) 769-1450.

The permit(s) will be subject to all
prior water rights. Protests must be
filed with the applicant and with the
Director, Dept. of Water Resources,
Northern Region, 1910 Northwest
Blvd., Suite 210, Coeur d'Alene, Ida-
ho 83814 on or before OCTOBER
25, 1993.

R. KEITH HIGGINSON, Director
SNP#5692 Oct 7, 14, 1993

5692



State of Idaho

DEPARTMENT OF WATER RESOURCES

NORTHERN REGION,

(208) 769-1450

Suite No. 210 • 1910 Northwest Blvd. • Coeur d'Alene, Idaho 83814-2615

~~(208) 769-1450 • Fax (208) 769-1454~~

Fax (208) 769-1454

CECIL D. ANDRUS

September 29, 1993

R. KEITH HIGGINSON

Director

Pend Oreille Shores Resort
P.O. Box 44
Hope, Id. 83836

Re: 96-8774

Gentlemen:

Re: Water Appropriation Application No. 96-8774.

The Idaho Department of Water Resources hereby acknowledges receipt of the above referenced Application for Permit to appropriate the Public Waters of the State of Idaho. To assist us in providing you with prompt, accurate service, please refer to the above referenced number in all future matters concerning this water right application.

Your appropriation application is currently being prepared for advertising in the county newspaper. This advertisement will be published for two consecutive weeks followed by a waiting period of ten days to allow for the submittal of protests. Normal processing time is approximately 3 to 4 months, if the application is not protested.

If the application is not protested, it will be forwarded to Boise to be considered for approval by the Director. However, if the application is protested during this waiting period, you will be sent a copy of the protest and instructions to aid you in resolving the protest without a hearing. However all protests must be resolved before approval of the application can be made, so if the protestant does not voluntarily withdraw the protest, this department will conduct a conference and/or hearing on the matter.

If your application is for groundwater and unless you are using a well that was constructed prior to July 1, 1987, it will be necessary for you to apply for a well drilling permit upon approval of the appropriation application. Well drilling permits can be issued by this office only to holders of approved appropriation permits.

If you have any questions or if I can be of any assistance please feel free to contact me at this office.

Sincerely,

ALLEN BEARDSLEE
Senior Water Resources Agent

AB/pms

SEP 25 1993

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

USE TYPEWRITER OR
BALLPOINT PEN

WELL DRILLER'S REPORT

State law requires that this report be filed with the Director, Department of Water Resources within 30 days after the completion or abandonment of the well.

1. WELL OWNER

Name PEND OREILLE SHORES RESORT
Address 1250 HWY 200 HOPE ID 83836
Drilling Permit No. 96-93-N-186-000
Water Right Permit No. _____

7. WATER LEVEL

Static water level 18' feet below land surface.
Flowing? ☐ Yes ☒ No G.P.M. flow _____
Artesian closed-in pressure _____ p.s.i.
Controlled by: ☐ Valve ☐ Cap ☐ Plug
Temperature _____ °F. Quality _____
Describe artesian or temperature zones below.

2. NATURE OF WORK

- ☒ New well ☐ Deepened ☐ Replacement
☐ Well diameter increase ☐ Modification
☐ Abandoned (describe abandonment or modification procedures such as liners, screen, materials, plug depths, etc. in lithologic log, section 9.)

8. WELL TEST DATA

☐ Pump ☐ Bailer ☒ Air ☐ Other _____

Discharge G.P.M.	Pumping Level	Hours Pumped
<u>90</u>		

3. PROPOSED USE

- ☒ Domestic ☐ Irrigation ☐ Monitor
☐ Industrial ☐ Stock ☐ Waste Disposal or Injection
☐ Other _____ (specify type)

4. METHOD DRILLED

- ☒ Rotary ☒ Air ☐ Auger ☐ Reverse rotary
☐ Cable ☐ Mud ☐ Other _____
(backhoe, hydraulic, etc.)

5. WELL CONSTRUCTION

Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____

Thickness _____ Diameter _____ From _____ To _____
250 inches 8 inches + 2 feet 158 feet
_____ inches _____ inches _____ feet _____ feet
_____ inches _____ inches _____ feet _____ feet

Was casing drive shoe used? ☒ Yes ☐ No

Was a packer or seal used? ☐ Yes ☒ No

Perforated? ☒ Yes ☐ No

How perforated? ☐ Factory ☒ Knife ☐ Torch ☐ Gun

Size of perforation? 1/4 inches by _____ inches

Number _____ From _____ To _____

36 perforations 150 feet 158 feet

_____ perforations _____ feet _____ feet

_____ perforations _____ feet _____ feet

Well screen installed? ☒ Yes ☐ No

Manufacturer Johnson Type Stainless

Top Packer or Headpipe 148'

Bottom of Tailpipe _____

Diameter 7 1/2 Slot size .030 Set from 158 feet to 148 feet

Diameter _____ Slot size _____ Set from _____ feet to _____ feet

Gravel packed? ☐ Yes ☒ No ☐ Size of gravel _____

Placed from _____ feet to _____ feet

Surface seal depth 20 Material used in seal: ☐ Cement grout

☒ Bentonite ☐ Puddling clay ☐ _____

Sealing procedure used: ☐ Slurry pit

☐ Temp. surface casing ☒ Overbore to seal depth

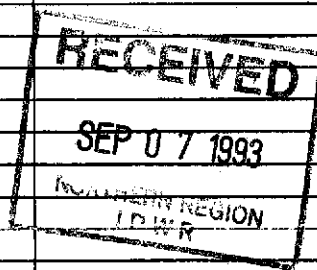
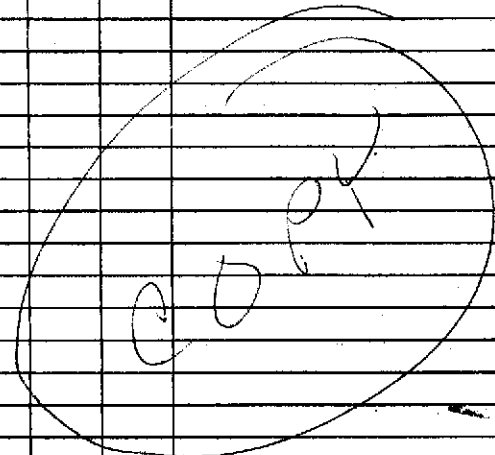
Method of joining casing: ☐ Threaded ☒ Welded

☐ Solvent Weld ☐ Cemented between strata

Describe access port _____

9. LITHOLOGIC LOG

Bore Diam.	Depth		Material	Water	
	From	To		Yes	No
<u>12</u>	<u>0</u>	<u>20</u>	<u>SAND and GRAVEL</u>		☒
<u>10</u>	<u>20</u>	<u>35</u>	<u>SAND and GRAVEL</u>		☒
<u>10</u>	<u>35</u>	<u>39</u>	<u>GRAVEL</u>		☒
<u>10</u>	<u>39</u>	<u>55</u>	<u>GRAVEL</u>		☒
<u>10</u>	<u>55</u>	<u>144</u>	<u>GRAY CLAY</u>		☒
<u>10</u>	<u>144</u>	<u>158</u>	<u>HEAVY GRAVEL</u>	<u>90</u>	



6. LOCATION OF WELL

Sketch map location must agree with written location.

Subdivision Name PEND OREILLE
SHORES
Lot No. UNIT A-1 Block No. _____
County BONNER
Address of Well Site HWY 200 HOPE
(give at least name of road)
NW 1/4 SE 1/4 Sec. 1 T. 56 N ☒ or S ☐
R. 1 E ☒ or W ☐

10.

Work started 8-13 finished 8-18-93

11. DRILLER'S CERTIFICATION

I/We certify that all minimum well construction standards were complied with at the time the rig was removed.

Firm Name HESTER DRILLING Firm No. 528

Address Box 142, Paint River ID Date 8-19-93

Signed by Drilling Supervisor Charles Hester

and
(Operator) _____
(If different than the Drilling Supervisor)